

POE JUN

CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Mail Stop RCE Commissioner for Patents P.O. 1450 Alexandria, VA 22313-1450

Application No.	10/016,740
Filing Date	October 30, 2001
First Named Inventor	Gregory Kime
Art Unit	2153
Examiner Name	Strange, Aaron N.
Attorney Docket Number	42390P12158

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s). Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. Consider the arguments in the Appeal Brief or Reply Brief previously filed on ii. ☐ Other × Enclosed ☐ Information Disclosure Statement (IDS) ★ Amendment/Reply ☐ Affidavit(s)/Declaration(s) 2. Miscellaneous Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) Other 3. The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. Fees The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, \square to Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet. 11/14/2006 MBIZUNES 00000036 10016740 RCE fee required under 37 CFR 1.17(e) i. 790.00 OP Extension of time fee (37 CFR 1.136 and 1.17) ij. 01 FC:1801 ☐ Other: (\$.00) b. Check in the amount of \$790.00 enclosed Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Registration No. (Attorney/Agent) 51,841 Name (Print/Type) Aslam A. Jaffery November 9, 2006 Signature CÉRTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. November 9, 2006

Date

November 9, 2006

Krista Mathieson

Name (Print/Type)

Signature

NOV 1 3 2006					
		Complete if Known			
FOR EV 200	TTAL	Application Number 10/016,740			
for FY 200		Filing Date	October 30, 2001		
Patent fees are subject to annual rev	•	First Named Inventor	Gregory Kime		
<u> </u>		Examiner Name	Strange, Aaron N.		
Applicant claims small entity status. S	iee 37 CFK 1.27.	Art Unit	2153		
TOTAL AMOUNT OF PAYMENT	(\$) 790.00	Attorney Docket No.	42390P12158		
METHOD OF PAYMENT (check at					
☐ Check ☐ Credit card ☐ Money (Other (please identify):			
Deposit Account Deposit Account	Number: <u>02-2666</u> D	eposit Account Name:	Blakely, Sokoloff, Taylor & Zafman LLP		
For the above-identified deposit ac Charge fee(s) indicated below Charge any additional fee(s) of under 37 CFR §§ 1.16, 1.17,	v or underpayment of fee(Charge fee(s)	indicated below, except for the filing fee		
FEE CALCULATION					
4 57704 01 4114 5550					
1204 790 2204 395 **Reissue indeper 1205 300 2205 150 **Reissue ctaims i SUBTOTAL (1)		ent **or number	previously paid, if greater, For Reissues, see below		
Total Claims Independent Claims Subtractarins Total Claims Independent Subtractarins Total Claims Subtractarins Claims Total Claims Subtractarins Ax Subtractarins Ax Subtractarins Ax Multiple Dependent Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description Code (\$) 1202 50 2202 25 Claims in excess of 1201 200 2201 100 Independent claim 1203 360 2203 180 Multiple Dependent 1204 790 2204 395 **Reissue independent 1205 300 2205 150 **Reissue claims in SUBTOTAL (1) 2. ADDITIONAL FEES Large Entity Small Entity	of 20 ns in excess of 3 nt claim, if not paid ndent claims over original patent in excess of 20 and over original patent in excess of 20 and over original patent.	ent **or number	previously peid, if greater, For Reissues, see below		
Total Claims Independent Claims Solution Independent Claims Multiple Dependent Large Entity Fee Fee Fee Fee Fee Fee Fee Description Code (5) 1202 50 2202 25 Claims in excess of 1201 200 2201 100 Independent claim 1203 360 2203 180 Multiple Dependent 1204 790 2204 395 **Reissue independent 1205 300 2205 150 **Reissue claims i SUBTOTAL (1) 2. ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee Fee Fee	of 20 so in excess of 3 ant claim, if not paid adent claims over original patent in excess of 20 and over original patent (\$) (\$) 0.00	ent **or number			
Total Claims Independent Claims Independent Claims Multiple Dependent Large Entity Fee Fee Fee Fee Fee Fee Fee Description Code (\$) 1202 50 2202 25 Claims in excess of 1201 200 2201 100 Independent claim 1203 360 2203 180 Multiple Dependent 1204 790 2204 395 "Reissue independent 1205 300 2205 150 "Reissue claims in SUBTOTAL (1) 2. ADDITIONAL FEES Large Entity Fee Fee Fee Fee Fee Code (\$) Code (\$)	of 20 si in excess of 3 and claim, if not paid in excess of 20 and over original patent in excess of 20 and over original patent (\$) (\$) O.00	•*•or number	previously paid, if greater, For Reissues, see below Fee Paid		
Total Claims	of 20 so in excess of 3 ant claim, if not paid adent claims over original patent in excess of 20 and over original patent (\$) (\$) 0.00	ent			
Total Claims	below Fee Paid 50.00 200.00 = \$0.00 200.00 = \$0.00 of 20 as in excess of 3 and claim, if not paid addent claims over original patent in excess of 20 and over original pate (\$) 0.00 Fee Description te filing fee or oath e provisional filing fee or cover sheet decification	ent			
Total Claims	below Fee Paid 50.00 200.00 = \$0.00 200.00 = \$0.00 of 20 ns in excess of 3 nt claim, if not paid nodent claims over original patent in excess of 20 and over original patent in excess or 20 and ov	ent			
Total Claims	below Fee Paid 50.00 200.00 = \$0.00 200.00 = \$0.00 of 20 as in excess of 3 and claim, if not paid addent claims over original patent in excess of 20 and over original pate (\$) 0.00 Fee Description te filing fee or oath e provisional filing fee or cover sheet decification	ent			
Total Claims	of 20 so in excess of 3 and claim, if not paid in excess of 20 and over original patent in excess of 3 and over original patent in excess of 20 and over original patent in excess or 20 and over origina	ent			

Fee	Fee	Fee	Fee			
Code	(\$)	Code	(\$)	Fee Description		Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
2053	130	2053	130	Non-English specification		
1251	120	2251	60	Extension for reply within first month		
1252	450	2252	225	Extension for reply within second month		
1253	1,020	2253	510	Extension for reply within third month		
1254	1,590	2254	795	Extension for reply within fourth month		
1255	2,160	2255	1,080	Extension for reply within fifth month		
1401	500	2401	250	Notice of Appeal		
1402	500	2402	250	Filing a brief in support of an appeal		
1403	1,000	2403	500	Request for oral hearing		
1451	1,510	2451	1,510	Petition to institute a public use proceeding		
1460	130	2460	130	Petitions to the Commissioner		
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))		
Other fee	e (specify)		RCE	Filing Fee		790.00
				SUBTOTAL (2)	(\$)	790.00

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Aslam A. Jaffery	Registration No. (Attorney/Agent)	51,841	Telephone	(303) 740-1980	
Signature	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			Date	11/09/06	